

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET
NUMBER
PHARMA 123

As a below named inventor, I hereby declare that:

JAN 16 2002

PATENT & TRADEMARK OFFICE 89

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DIOXOLANE ANALOGS FOR IMPROVED INTER-CELLULAR DELIVERY

the specification of which (check only one item below):

is attached hereto.
 was filed as United States application

Serial No. _____

on October 15, 2001

and was amended

on _____ (if applicable).

was filed as PCT international application

Number _____

on _____,

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, § 119 or 365 (b) of the following United States provisional application(s) and of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL AND FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
United States	60/288,424	May 4, 2001	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
United States	60/239,885	October 13, 2000	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); and Jonathan G. Brown (47,451) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: Customer No. 23599

Telephone No.
703/243-6333

Direct Telephone Calls to:
703-812-5308



23599

PATENT TRADEMARK OFFICE

Combined Declaration for Patent Application and Power of Attorney (Continued)
 (Includes Reference to PCT International Applications)

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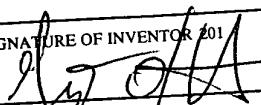
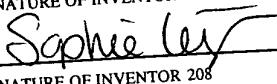
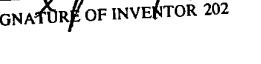
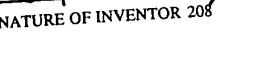
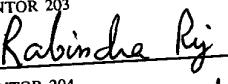
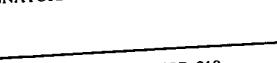
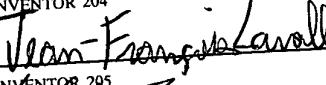
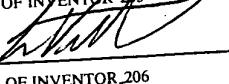
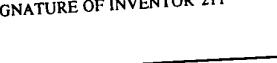
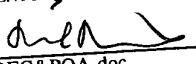
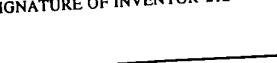
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Giorgio	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Boulos	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	H7K 3M1 Quebec, Canada
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Zacharie	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Rej	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Lavallée	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Vaillancourt	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
2 0 7	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Denis	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Montreal	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	STREET	Montreal	H3G 2M2 Quebec, Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Mascouche	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Montreal	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	STREET	Montreal	J7K 38J Quebec, Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Denis	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Montreal	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	STREET	Montreal	H1E 1A3, Quebec, Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Lévesque	STATE OR FOREIGN COUNTRY
	POST OFFICE ADDRESS	STREET	Quebec	Canada
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	Mirabel	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	STREET	Mirabel	J7N 1V3, Quebec, Canada

Combined Declaration for Patent Application and Power of Attorney (Continued)
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	DATE Nov 8, 2001	SIGNATURE OF INVENTOR 207 	DATE 6 Nov 2001
SIGNATURE OF INVENTOR 202 	DATE	SIGNATURE OF INVENTOR 208 	DATE
SIGNATURE OF INVENTOR 203 	DATE Nov 6, 2001	SIGNATURE OF INVENTOR 209 	DATE
SIGNATURE OF INVENTOR 204 	DATE Nov 7, 2001	SIGNATURE OF INVENTOR 210 	DATE
SIGNATURE OF INVENTOR 205 	DATE 6/11/2001	SIGNATURE OF INVENTOR 211 	DATE
SIGNATURE OF INVENTOR 206 	DATE Nov 6, 2001	SIGNATURE OF INVENTOR 212 	DATE

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United States	60/288,424	May 4, 2001	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
United States	60/239,885	October 13, 2000	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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Combined Declaration for Patent Application and Power of Attorney (Continued)
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2 0 1	FULL NAME OF INVENTOR	FAMILY NAME Attardo	FIRST GIVEN NAME Giorgio	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Laval	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 2740, rue Prudentiel	CITY Laval	STATE & ZIP CODE/COUNTRY H7K 3M1 Quebec, Canada
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME Zacharie	FIRST GIVEN NAME Boulos	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Laval	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 3202, Honore de Balzac	CITY Laval	STATE & ZIP CODE/COUNTRY H7P 5Y3 Quebec, Canada
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME Rej	FIRST GIVEN NAME Rabindra	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Montreal	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 2150, rue Mackay, App. 1105	CITY Montreal	STATE & ZIP CODE/COUNTRY H3G 2M2 Quebec, Canada
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME Lavallée	FIRST GIVEN NAME Jean-Francois	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Mille-Isles	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 28, Chemin Scraire	CITY Mille-Isles	STATE & ZIP CODE/COUNTRY J0R 1A0 Quebec, Canada
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME Vaillancourt	FIRST GIVEN NAME Louis	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Mascouche	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 2869, Desportes	CITY Mascouche	STATE & ZIP CODE/COUNTRY J7K 38J Quebec, Canada
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME Denis	FIRST GIVEN NAME Réal	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Montreal	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 7250, boul. Gouin est, App. 06	CITY Montreal	STATE & ZIP CODE/COUNTRY H1E 1A3, Quebec, Canada
2 0 7	FULL NAME OF INVENTOR	FAMILY NAME Lévesque	FIRST GIVEN NAME Sophie	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Mirabel	STATE OR FOREIGN COUNTRY Quebec	COUNTRY OF CITIZENSHIP Canada
	POST OFFICE ADDRESS	STREET 8290, du Labour	CITY Mirabel	STATE & ZIP CODE/COUNTRY J7N 1V3, Quebec, Canada

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SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202 <i>Bob Zachy</i>	DATE <i>November 6, 2001</i>	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE